Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		OTHER THAN	
TOTAL CLAIMS			W				RATE	FEE		RATE	FEE
FOR -			NUMBER FILED		NUMBER EXTRA		BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			W minus 20=		* 2		X\$ 9=		OR	X\$18=	18
INDEPENDENT CLAIMS			3 minus 3 =		*		X42=		OR	X84=	10
MU	LTIPLE DEPEN	RESENT	ESENT			+140=	y *	OR	+280=		
* If the difference in column 1 is less than zero, enter "C						olumn 2	TOTAL		OR	TOTAL	768
CLAIMS AS AMENDED - PART II							OTHER THAN SMALL ENTITY OR SMALL ENTITY				
	i i	(Column 1) CLAIMS		(Colur		(Column 3)	SWALL			SWALL	ADDI-
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		= "."	X\$ 9=		ÓR	X\$18=	
	Independent	*	Minus	***		=	X42=		OR	X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	T CLAIM		+140=		OR	+280=	1
	TOTAL								OR	TOTAL	
AUUII. FEE										ADDIT. FEE	<u></u>
		(Column 1) CLAIMS		(Colu	mn 2) HEST	(Column 3)	F	ADDI-			ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVI	IBER OUSLY FOR	PRESENT EXTRA	RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=.	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	T O! A!!!	-	X42=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+140=		OR	+280=	* *
	18/14/						TOTAL ADDIT. FEE		OR	. TOTAL ADDIT. FEE	
		(Column 1)	(Column 2) (Column 3)								
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	X42=	,	OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT (*
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											